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Multi-country programme document

Pacific Island Countries

Summary

The multi-country programme document for the Pacific island countries is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The multi-country programme document includes a proposed aggregate indicative budget of $54,116,000 from regular resources, subject to the availability of funds, and $67,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2018 to 2022.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2017.

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Programme rationale

1. The Pacific islands subregion presents unique challenges and opportunities. It has a population of some 2.45 million,[1] 40 per cent of whom are under age 18, and is spread across 14 countries and territories in an area equivalent to 15 per cent of the earth's surface. The countries have small, culturally diverse populations, high levels of environmental vulnerability and limited income sources, all of which challenge their ability to ensure sustainable, equitable human development.

2. They are among the countries most vulnerable to climate change and natural disasters. Eight are among the 20 countries in the world with the highest average annual disaster losses scaled by gross domestic product (GDP).[2] With three countries (Kiribati, Tuvalu and Solomon Islands)[3] [4] classified as least developed fragile states and three others as either fragile (Federated States of Micronesia and the Marshall Islands) or least developed countries (Vanuatu), the majority of the 14 countries are constrained in their capacities to deliver equitable social services.

3. Across the Pacific, GDP growth rates averaged around 4 per cent in 2015, and are projected to hover between 4 and 5 per cent.[5] Economic growth prospects are brighter in a few countries, particularly Samoa and Tonga, with increasing private sector and infrastructure investments. The long-term outlook for growth depends on countries' abilities to maximize the benefits of their limited income opportunities, including fisheries, remittances and tourism.

One in five Pacific islanders live in poverty, and the proportion of the population living below the national poverty line has been increasing in the Federated States of Micronesia, Samoa, Tonga, Tuvalu, with Fiji and Solomon Islands showing declining rates.[6] Deprivation is generally higher in outer islands, peri-urban areas and informal settlements, where access to social services is low. Child poverty prevalence is higher than the national level in countries with available data – Federated States of Micronesia, Kiribati, Palau, Samoa, Solomon Islands and Tonga. The percentage of children aged 0-14 living below the national poverty line is highest in the Federated States of Micronesia, Fiji, Palau, Samoa and Tonga.[7] In addition, around 40 per cent[8] of children live in highly vulnerable households,[9] where small external shocks can push them into poverty. Most Pacific governments have recognized the need to redesign social safety nets to respond to specific vulnerabilities, including climate change.

4. Data suggest some progress with maternal mortality and significant progress with under-five mortality in the past decade. However, seven countries have under-five mortality rates (U5MR) above the Sustainable Development Goals target of 25 per 1,000 live births by 2030. U5MR ranges from eight deaths per 1,000 live births in the Cook Islands to 56

[1] UNFPA, 2016 (available at https://esa.un.org/unpd/wpp/DataQuery/).
[2] World Bank, "Acting today for tomorrow: the countries are Vanuatu, Niue, Tonga, Federated States of Micronesia, Solomon Islands, Fiji, Marshall Islands, Cook Islands", 2012.
[3] United Nations Committee for Development Policy, 2016.
[4] World Bank, 2014.
[5] World Bank, 2017 (estimates available at http://www.worldbank.org/en/country/pacificislands).
[6] UNDP, "The state of human development in the Pacific: a report on vulnerability and exclusion in a time of rapid change", 2014.
[7] World Bank, "Hardship and vulnerability in the Pacific island countries, 2014.
[8] UNDP, 2014
[9] Living in households where the expenditure is less than double the national poverty line.

deaths per 1,000 live births in Kiribati.[10] This means that an estimated 1,700 children died before age five across the 14 Pacific island countries in 2016. A third of those deaths occurred in Solomon Islands. Over 80 per cent of under-five deaths occur in the first year of life; with over half of infant deaths in the first 28 days, ranging from 50 per cent in Solomon Islands to 79 per cent in Nauru. Only Cook Islands, Palau and Tonga have low neonatal mortality rates. The major causes of neonatal deaths are infection, birthing complications, preterm births and congenital diseases. Seven countries (Federated States of Micronesia, Kiribati, the Marshall Islands, Samoa, Tokelau, Tonga, Vanuatu) do not meet the global target of 90 per cent national immunization levels for the measles vaccine and three doses of combined diphtheria/pertussis/tetanus (DPT3), with rural and outer island children having the lowest coverage. Of the seven countries with data, maternal mortality varies widely, from 30 to 124 deaths per 100,000 live births in Fiji and Tonga, respectively.

5. Significant data gaps exist on malnutrition. The available information shows stunting of children under-five is highest in Solomon Islands (32 per cent), Vanuatu (29 per cent), and Nauru (24 per cent). In general, the coverage of essential nutrition interventions, including infant and young child feeding practices, de-worming and iron supplementation for pregnant women and children under-five, are low in all countries.

6. Obesity prevalence among women aged 15-64 ranges from 23 per cent in Vanuatu to 68 per cent in Tokelau, while overweight prevalence ranges from 32 per cent in Fiji to 90 per cent in Samoa.[11] While data is scarce, high levels of childhood overweight and obesity were found in Tonga (17.3 per cent). High to very high levels of overweight and obesity (47 per cent to 8 per cent) were found among adult females in the Federated States of Micronesia, Fiji, Kiribati, Samoa, Solomon Islands and Vanuatu. Maternal obesity may have negative consequences both on the foetus and later in life.

7. High adolescent birth rates, women's poor health and nutritional status, limited supply, utilization and quality of health services, particularly for remote and vulnerable populations, along with limited availability of community-based outreach and referral systems, contribute to poor maternal, neonatal and child health. Gaps exist in health planning, staffing, budgeting, operational guidance, updated protocols and supply chain management. Health-seeking behaviour remains a challenge: new approaches to community and health worker capacity-building is required to strengthen the quality of services. The prevalence of HIV is generally low in the Pacific, with all countries having rates below 1 per cent. Fiji and the Marshall Islands have a higher prevalence among youth aged 15-24 years. The incidence of sexually transmitted infections in pregnant women is highest in Samoa (36 per cent), followed by Fiji (29 per cent) and Vanuatu (25 per cent).

8. Over 90 per cent of Pacific islanders have access to an improved drinking water source. However, one in three persons in Kiribati, one in five in Solomon Islands and one in ten in the Federated States of Micronesia have no access to improved water sources. In addition, the availability of safe drinking water cannot be guaranteed, particularly in remote outer islands fully dependent on intermittent rainfall.

[10] United Nations Inter-agency Group for Child Mortality Estimation, "Levels and trends in child mortality", 2015.

[11] STEPS surveys, various years where comparable data is available, 2002 to 2011.

9. While two thirds of the population in the Pacific have access to improved sanitation facilities,[12] that access is uneven, with Solomon Islands (30 per cent), Kiribati (40 per cent), the Federated States of Micronesia (57 per cent) and Vanuatu (58 per cent) having the lowest. The joint monitoring programme estimates high rates of open defecation in Solomon Islands (54 per cent) and in Kiribati (36 per cent). Sanitation and water coverage in the Pacific have been stagnant in the last 25 years, with minimal gains made since 1990.

10. Household-level data show large inequalities in water, sanitation and hygiene (WASH) coverage, with higher-income households having access to better facilities. For example, in Vanuatu the wealthiest quintile of the population has 97 per cent coverage of improved sanitation compared with only 38 per cent of the poorest quintile.[13] The impact of limited household access to water and sanitation falls disproportionately on women. A study of informal settlements in the region found that women were subjected to risk of sexual and physical violence from collecting water or defecating away from home late at night or in early morning.[14]

11. Although data on safe hygiene practices is limited, an analysis highlighted that only 40 per cent of households across six countries practice safe disposal of children's faeces.[15] Household surveys for Solomon Islands[16] and Vanuatu[17] found that only 17 per cent and 32 per cent, respectively, of rural households have a dedicated hand-washing place with water and soap available.

12. Self-reported data collected by the ministries of education in Kiribati, the Marshall Islands and Solomon Islands found low levels of schools with WASH facilities. In Kiribati, only 3 per cent of schools had safe water available and 4 per cent had sanitation facilities.

13. Despite progress, a number of enabling environment barriers to accelerating access to water and sanitation still exist. These include outdated national and provincial policies, insufficient budget allocation, and lack of reliable data to inform decision-making.

14. Based on net enrolment ratios, more than 70 per cent of 3 to 5 year olds in the Pacific region do not have access to pre-primary or preschool education. Bottlenecks include the lack of physical availability of quality early childhood care and education (ECCE) services, insufficient regulatory oversight and monitoring. There are limited legislative provisions and investment in the sub-sector that impede institutionalization of quality early ECCE services. Additionally, parents' low awareness of the benefits of these services limits participation of children in pre-primary education.

15. While national enrolment rates in primary education have improved across the region, learning attainment, survival and completion rates remain low. The majority of primary school-aged students are enrolled in school, with a regional adjusted net enrolment rate for primary education of 89 per cent in 2012.[18] Recent data show that over 30 per cent of children in Solomon Islands and Vanuatu, and 20 per cent in the Marshall Islands did not

[12] UN-Habitat, UNICEF, SPC, WHO, "Sanitation, drinking water and health in Pacific island countries", 2015.
[13] UNICEF, East Asia and the Pacific Regional Office, "A snapshot of water and sanitation in the Pacific", 2015.
[14] PRIF, Review of Water and Sanitation in Informal Settlements in Melanesian Countries: Solomon Islands, Fiji, Vanuatu, Papua New Guinea, 2015.
[15] Ibid.
[16] MHMS, UNC, UNICEF, WaterAID, "Solomon Islands Rural WASH Baseline Survey", 2016.
[17] DGMWR, UNICEF, "Vanuatu water, sanitation and hygiene country profile", 2016.
[18] UNESCO Apia, "Pacific education for all: 2015 review", 2015.

complete their final year of primary education. Available data show that only 10 per cent of children with disabilities have access to schooling.

16. The highest rates of out-of-school children (primary) are in Solomon Islands (19 per cent), Nauru (13 per cent) and the Federated States of Micronesia (13 per cent).[19] Poor access in hard-to-reach areas, lack of curriculum relevancy for lifelong learning and employability, inadequacy of teacher quality, and absence of child-friendly, inclusive schooling pose barriers to quality primary education and expanding post-basic education. The Pacific lacks services for out-of-school children, with few non-formal, alternative education or second-chance education programmes.

17. Learning outcomes are a concern for those in school. The 2015 Pacific islands literacy and numeracy assessment (PILNA) indicates that a large proportion of students in years four and six are not meeting learning targets. Gender disparities also persist. Many primary school teachers are untrained – over one third in Solomon Islands and Vanuatu – and there are system inadequacies in pre- and in-service training to support effective teaching and learning, particularly in remote multi-grade schools. Overall, the region's education sector faces significant capacity constraints to deliver quality services, with knowledge and behaviour gaps among service providers, parents and caregivers.

18. While evidence is limited, studies reveal a series of common protection issues that children in the Pacific face, often rooted in structural factors, such as inequity, discrimination, entrenched social norms and population remoteness. A significant concern is the high prevalence of violence that children suffer and witness in their households, schools and communities.

19. Despite significant progress in the development of stronger child protection approaches, children continue to face violence at home and in school and are not sufficiently protected by their communities. While positive trends have emerged in legal and policy reform, the implementation of strengthened legal frameworks remains a challenge. This is due to weak dissemination of laws to professionals tasked with implementation and lack of resources to structural changes. More than 20 per cent of parents in the Federated States of Micronesia, Palau and the Marshall Islands daily use physical punishment "that hurts a child", and 12 per cent suffer "verbal humiliation".[20,21,22] There is consistently high use of physical discipline among caregivers in the Pacific.[23] Moreover, about 57 per cent of children whose mothers experienced physical violence either saw or heard their mother being assaulted, and 17 per cent were beaten during a violent incident in Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu.[24] Prevalence of sexual violence is highest in Solomon Islands, Nauru and Vanuatu with, respectively, 37 per cent, 30 per cent and 30 per cent of women reported facing sexual violence before age 15.[25,26,27]

[19] UNESCO, "Out-of-school children and adolescents in Asia and the Pacific", 2015.
[20] Child protection baseline report for the Federated States of Micronesia, 2014.
[21] The Republic of Palau child protection baseline report, 2014.
[22] Child protection baseline report, Republic of Marshall Islands, 2012.
[23] UNICEF Pacific, "Protect me with love and care", 2010. Studies conducted in Fiji, Kiribati, Solomon Islands and Vanuatu in collaboration with the governments.
[24] UNICEF, "Harmful connections: examining the relationship between violence against women and violence against children in the South Pacific", 2015. Countries studied: Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu.
[25] Solomon Islands family health and safety study, 2009.
[26] Nauru family health and support study, 2014.

20. Prevailing attitudes and practices negatively impact protection outcomes. Gender roles and relations across the region are deeply rooted in patriarchy. Social norms in most countries dictate that corporal punishment is widely accepted and practised by parents, teachers and others.

21. Limited data reveals that referral rates for children in contact with the law are very low, ranging from 6 per cent of cases in Kiribati to 27 per cent in Fiji, the majority dealt with at the community level. While diversion from formal systems is desirable, it is not clear to what extent children's rights are safeguarded in community processes.[28]

22. Legal provisions have not blended or harmonized with entrenched customary law practised in all countries. National legal frameworks across the Pacific lack the resources to be fully operational. The social welfare workforces are often untrained and overburdened.

23. The multi-country programme, 2018-2022, applies a strengthened equity approach, building on lessons of the three-tier approach of the last two cycles, where 14 countries were placed within three categories based on gross national income and the human development index. The programme prioritized three countries in the lowest tier: Kiribati, Solomon Islands and Vanuatu. The tier system led to sidelining of some countries with poor child indicators, such as the Marshall Islands and Federated States of Micronesia. In the new multi-country programme, the priority and scope of support to individual countries and territories is based on analysis of magnitude and severity of deprivations and inequities faced by children in each country, along with disaster and climate risks and the role played by other development actors.

24. Based on analysis of common child deprivations across the Pacific, UNICEF will prioritize actions that accelerate access of the most vulnerable to quality, resilient services which: (a) reduce infant deaths and improve health and nutrition of young children, including water, sanitation and hygiene; (b) ensure that children are better prepared for and complete quality primary education with better learning outcomes; (c) protect children and women from violence and abuse; and (d) strengthen families' and communities' economic resilience.

Programme priorities and partnerships

25. The multi-country programme promotes the rights of all children in the Pacific islands, by strengthening national/regional capacities to ensure equitable opportunities for every child to reach full potential. Guided by the principle of the Sustainable Development Goals of 'leaving no one behind', the programme will focus on reducing inequity gaps across and within countries, particularly in remote/outer islands, peri-urban and informal settlements, and target children with disabilities.

26. The multi-country programme is complementary to the framework for Pacific regionalism and supportive of the Small Island Developing States Accelerated Modalities of Action Pathway. It will contribute to Sustainable Development Goal and national development strategies for enhancing sustainable, inclusive development in 14 countries, and all six outcomes of the United Nations Pacific Strategy, 2018-2022: (a) climate change, disaster resilience and environmental protection; (b) gender equality; (c) sustainable and

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[27] Vanuatu National Survey on Women's Lives and Family Relationship, 2011.

[28] UNICEF, regional summary of the Fiji, Kiribati, Solomon Islands and Vanuatu child protection baseline reports, 2008.

inclusive economic empowerment; (d) equitable basic services; (e) governance and community engagement; and (f) human rights.

27. The programme will be coordinated as part of the United Nations Pacific Strategy, 2018-2022, and the work of two United Nations country teams. It will be implemented in cooperation with governments of eleven independent states and three territories, in collaboration with agencies of the Council of Regional Organisations in the Pacific, such as Pacific Islands Forum Secretariat, Pacific Community, Secretariat of the Pacific Regional Environment Programme and University of South Pacific. Key partners will include non-governmental organizations (NGOs), community-based organizations, faith-based organizations, media, private sector, academia and donors, including the governments of Australia, China, Japan, New Zealand, the Republic of Korea and the United States of America, as well as the European Commission and a number of global movements.

28. The programme has six components: (a) child and maternal health and nutrition; (b) water, sanitation and hygiene; (c) education; (d) child protection; (e) policy, evidence and social protection; and (f) programme effectiveness. The programme will demonstrate integrated, effective solutions to tackle inequalities at local level recognizing the need for rapid emergency response and longer term development in the Pacific context. Given the high exposure to climate change and natural disasters in Pacific countries, the programme will mainstream emergency preparedness and response and disaster risk reduction (DRR) strategies in all components.

29. UNICEF will utilize six key strategies to achieve planned results:

(a) Evidence-based advocacy and technical assistance to support formulation and implementation of strengthened child-sensitive legal frameworks, policies, plans and budgets;

(b) Capacity development for generating data, planning, delivery and monitoring of strengthened and resilient social services, particularly in rural, remote and other under-served locations;

(c) Community engagement aligned with social and behavioural communication, focused on improved, healthy, protective practices;

(d) Partnership building with regional institutions, civil society organizations and with children and young people;

(e) Modelling of new approaches and technological innovations to enhance learning and link widely dispersed populations for real-time monitoring;

(f) Facilitation of South-South cooperation through knowledge exchange, sharing of good practices and lessons learned and establishing Pacific regional cooperation.

Child and maternal health and nutrition

30. UNICEF will focus on five major changes necessary to overcome key health system bottlenecks that contribute to high rates of neonatal and early infant deaths and levels of stunted and overweight children: (a) strengthened policies and legislative frameworks and their monitoring and enforcement; (b) enhanced planning and coordination mechanisms for health and nutrition, including linkages with WASH, early childhood development and social protection; (c) enhanced knowledge and skills of caregivers to adopt critical health, nutrition and care practices, supported by efforts to bring about shifts in social norms and sociocultural habits; (d) improved delivery and monitoring of quality facility and

community health and nutrition care services; and (e) strengthened capacity of health care systems to plan for, adapt to and recover from disasters and longer-term climate changes. The intensity of UNICEF support will be based on the context and child health situation in each country. UNICEF will work closely with ministries of health in collaboration with the Asian Development Bank (ADB), NGOs, Pacific Community, Rotary, United Nations Population Fund (UNFPA); and World Health Organization (WHO).

31. Across all countries, UNICEF will undertake technical collaboration with ministries of health for policy formulation, analysis of human resource capacities and financial flows, improving health information systems and management of health commodities. It will undertake evidence-based advocacy to promote strengthened investment in child and maternal health and nutrition. Through the Vaccine Independence Initiative, UNICEF will facilitate vaccine procurement and distribution, and technical support for effective vaccine and cold chain management in all 14 Pacific island countries. UNICEF will provide support on disaster preparedness and co-lead the nutrition sub-cluster to strengthen coordination capacity.

32. In five countries whose child and maternal health and nutrition indicators are worse off – the Federated States of Micronesia, Kiribati, the Marshall Islands, Solomon Islands and Vanuatu – UNICEF will support a comprehensive health systems-strengthening approach. By providing technical and financial assistance, UNICEF will strengthen the quality of service delivery both at the facility level and with community-based approaches on antenatal care, emergency obstetric and neonatal care, integrated management of childhood illness and immunization. Through the 1,000 days approach, UNICEF will promote high impact interventions to reduce stunting – including micronutrient supplementation, breastfeeding and complementary feeding, treatment of acute malnutrition, and sanitation, hygiene, stimulation and care practices. It will support actions to enhance parents' and caregivers' knowledge of and ability to practice safe, caring and protective behaviours. These will have an impact on maternal, child obesity and non-communicable diseases; WHO will work on overweight issues among adolescents.

33. UNICEF will support a targeted approach in countries with specific challenges. In Tonga, which has 17.3 per cent childhood obesity, UNICEF will provide technical support for a government-led programme tackling overnutrition. In Nauru, UNICEF will support the Government to address high neonatal mortality and stunting. Owing to high levels of disaster risk, UNICEF will provide technical and supply assistance to Fiji and Tonga for early action in the health sector and build more resilient systems.

Water, sanitation and hygiene

34. To increase children's access to adequate, equitable, affordable and safe drinking water and sanitation in rural, peri-urban and remote areas, UNICEF will: (a) generate evidence and build institutional capacity for WASH financial planning, coordination, service delivery and monitoring, focused on children with disabilities and girls' needs; (b) increase capacities of communities, schools and health-care providers to demand and manage WASH infrastructure, including during emergencies; and (c) promote healthy water, sanitation and hygiene behaviours.

35. UNICEF will provide capacity development and technical assistance for WASH policy, planning and standards development in all the 14 Pacific island countries. It will align this support with regional coordination and financing mechanisms established by the Pacific Region Infrastructure Facility, involving the Asia Development Bank, World Bank,

European Union, Japan International Cooperation Agency and the governments of Australia and New Zealand, in collaboration with the Pacific Community.

36. Based on levels of access to WASH services, the Federated States of Micronesia, Fiji, Kiribati, Solomon Islands and Vanuatu will receive comprehensive support for water, sanitation and hygiene, including menstrual hygiene as part of a WASH in Schools programme. UNICEF will implement the innovative drinking water safety and security planning approach to make communities resilient to climate change and natural hazards so they can safely manage their water resources during short-term or slow-onset disasters.

37. UNICEF will extend targeted support for cluster coordination to countries with relatively high levels of exposure to natural disasters, such as Tonga and Samoa. As Pacific cluster lead agency, UNICEF will facilitate learning exchange for preparedness, response and strengthening of national and community resilience through the Pacific WASH Coalition.

38. To promote new social norms for latrine use, and ultimately create open defecation free communities, in the Federated States of Micronesia, Kiribati and Solomon Islands, UNICEF will facilitate community approaches to total sanitation, together with government, local authorities, schools and communities. Additionally, it will support affordable sanitation marketing approaches to ensure adequate, sustainable supply of appropriate facilities at the community level, particularly for adolescent girls. It will use this platform for broader promotion of safe water, sanitation, hygiene, nutrition and care practices.

Education

39. To ensure that more pre-primary, primary and lower secondary school-aged children are in school and learning, UNICEF will work to strengthen education system capacities to: (a) increase availability and quality of early childhood education programmes; (b) improve quality of teaching; (c) develop alternative education opportunities for children out-of-school; and (d) build resiliency of schools and communities.

40. In collaboration with partners, including the World Bank, Save the Children and the United Nations Educational, Scientific and Cultural Organization (UNESCO), UNICEF will support ministries of education in five countries with the highest rates of children out of primary school and lowest learning outcomes: Federated States of Micronesia, Kiribati, Solomon Islands, Tuvalu and Vanuatu. It will provide technical support to generate and analyse evidence on children not learning optimally and to remove barriers to education for children out-of-school. UNICEF will support modelling of alternative education pathways for out-of-school children, particularly in Solomon Islands. Further, it will help to strengthen the ability of schools in rural and remote areas to identify children who are not learning. It will assist capacity building of teachers to better address students' learning needs, including children with learning challenges and disabilities.

41. Owing to specific vulnerabilities, UNICEF will target Fiji, Kiribati, Solomon Islands, Tonga, Tuvalu and Vanuatu to strengthen their education systems' resilience to disasters. This will include detailed stakeholder mapping exercises, promoting DRR in teaching-learning, providing technical guidance to ensure safe school environments and training teachers on improving the psycho-social wellbeing of children exposed to emergencies. In Nauru, UNICEF will support socially cohesive schooling through a child-friendly school approach.

42. Since the majority of countries in the Pacific have limited early learning opportunities, UNICEF will take a regional approach to promote greater investment in disability-inclusive early childhood education. It will complement this through its role as secretariat of the Pacific Regional Council for ECCE, and build on its advocacy partnership with the World Bank. UNICEF will provide technical assistance for policy and strategy formulation and implementation of comprehensive capacity development programmes in the Federated States of Micronesia, Kiribati, Solomon Islands, Tuvalu and Vanuatu towards institutionalizing universal pre-primary education.

Child protection

43. In partnership with ministries of social welfare, justice, security, health, education and youth, as well as the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), UNDP and UNFPA, UNICEF will accelerate support initiated in the previous multi-country programme for the development of comprehensive child protection systems in Pacific countries. The systems approach comprises three interlinked components: child-friendly justice system; child-focused social welfare system; family and community strengthening. All are supported by an enabling legal and policy framework and operational inter-sectoral coordination mechanisms, including health, education and social protection. Actions to prevent and respond to violence and abuse against children serve as entry points for the system-strengthening approach.

44. In Fiji, Kiribati, Solomon Islands and Vanuatu – with more advanced institutional frameworks – UNICEF will continue to support ministries responsible for social welfare and justice in implementing child protection policies, including initiatives to pilot service delivery mechanisms for children and families. UNICEF will provide technical support and funding for curriculum and operational standards development, capacity building of social welfare staff, justice sector officials and civil society organizations, equipping them to provide prevention and response services at national scale.

45. In the Federated States of Micronesia, Nauru, Samoa, Tonga and Tuvalu, UNICEF will support the development of child protection laws, policies and costing models to implement new measures, including organizational capacity strengthening.

46. To reduce high levels of child and gender-based violence, UNICEF will support evidence-informed social and behavioural change approaches aimed at parents, caregivers and teachers in pilot communities in Fiji, Solomon Islands, Kiribati and Vanuatu, focused on positive discipline and coping with stress. It will complement this by life skills-based programmes for adolescents, building communities' ability to promote positive behaviours.

47. UNICEF will provide technical support for the development and implementation of legislation that prohibits violent discipline in schools and for the establishment of mechanisms for children to safely report bullying, violence and abuse in selected countries. This includes the development and use of standard operational procedures and referral systems, as well as training programmes for national and subnational actors in key sectors.

48. In all 14 countries, UNICEF will continue to support civil registration authorities to strengthen birth registration, in collaboration with the Brisbane Accord Group, and emergency preparedness and response, in collaboration with national disaster management offices and the Pacific humanitarian protection cluster.

Policy, evidence and social protection

49. UNICEF will focus on increasing understanding of the multiple factors that contribute to the socioeconomic vulnerabilities of children in the Pacific and on promoting evidence-informed, systematized approaches to improving their situation. To do so, it will: (a) strengthen institutional capacity to generate data and evidence and monitor the situation of children; (b) enhance capacities in key ministries and among decision-makers to analyse and use evidence for equity-focused, child-centred development planning and budgeting, and; (c) promote child-sensitive comprehensive social protection systems, which include a focus on emergency and resilience.

50. UNICEF, in collaboration with the Pacific Community, Pacific Islands Forum Secretariat and United Nations organizations, will provide technical support to strengthen national statistical systems' capacity in all 14 countries to generate and use regular, reliable data on children for planning, policy formulation and reporting. This includes assisting countries to meet treaty-reporting obligations, particularly the Convention on the Rights of the Child. UNICEF will support national, multi-country or regional studies on child poverty, urbanization, climate change, DRR and other emerging issues affecting children.

51. UNICEF will enhance its focus on public finance for children, engaging in budget analysis and targeted advocacy with parliamentary committees, key ministries and youth parliaments. It will initially focus on the Federated States of Micronesia, Fiji, Kiribati, Samoa, Solomon Islands, Tonga and Vanuatu, where budget information is publicly available.

52. UNICEF will partner with donor governments, ADB and the World Bank to advocate and provide technical support for countries to expand or develop comprehensive child-sensitive social protection systems, as part of broader poverty reduction strategies. This will include support for evaluation and analysis of existing social assistance programmes and South-South knowledge-sharing on social protection, particularly from Asian countries.

Programme effectiveness

53. This component will ensure the programme is effectively managed, coordinated, monitored and evaluated, centrally and in field offices for efficient delivery of results. It serves to develop synergies and foster inter-sectoral programme implementation.

54. UNICEF will implement advocacy and partnership strategies in support of sector programmes, policies and plans. External communication will raise awareness of the situation of children through media and civil society. It will coordinate communication for social and behavioural change across all programmes to increase knowledge and skills that improve child health, nutrition, sanitation, hygiene and early learning, reduce violence against children and sustain demand for quality social services. The concept of healthy mind and healthy body will be encouraged through sports for development. It will expand use of communication technology and innovative approaches to accelerate access to learning, skills development, supervision and monitoring, including rural and remote communities.

55. The programme will provide cross-sectoral support for mainstreaming gender-responsive programming, and ensure coherence and coordination in emergency preparedness and response and resilience-strengthening actions across sectors. Operational support and field operations will be critical in delivering effective results for children.

Summary budget table

Programme component	*(In thousands of United States dollars)*		
	Regular resources	*Other resources*	*Total*
Child and maternal health and nutrition	7 000	16 000	23 000
Water, sanitation and hygiene	6 500	19 500	26 000
Education	7 000	14 500	21 500
Child protection	8 000	11 000	19 000
Policy, evidence and social protection	7 500	2 000	9 500
Programme effectiveness	18 116	4 000	22 116
Total	**54 116**	**67 000**	**121 116**

Programme and risk management

56. The multi-country programme document outlines UNICEF contributions to regional and national development priorities of the 14 Pacific island countries and serves as the primary unit of accountability to the Executive Board. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

57. Delivering the multi-country programme has unique challenges and risks, including the complicated management context dealing with scattered populations in 14 countries, the vastness resulting in very high transactions costs, overreliance on development aid, exposure to natural disasters, lack of reliable data to ensure services reach the most vulnerable, and limited human and financial capacities within many governments.

58. To mitigate risks, UNICEF will work within the United Nations system and regional organizations to monitor risks, build partner capacity in programme preparedness and delivery, data collection and situation-monitoring of children. Through the expanded programme focus on public finance, UNICEF will intensify advocacy for sustained investment in children and social services with Pacific island governments and development partners. UNICEF will seek a broader range of donors, including regional and global private foundations, that have an interest in climate change adaptation and mitigation.

59. The UNICEF field presence and the United Nations joint presence offices will ensure continued coordination with governments. Programme coordination, monitoring and annual reviews will be led by the ministries of planning or their equivalent in each country.

60. Emergency preparedness and response and DRR approaches are mainstreamed across all programmes, focused on enhancing resilience of social service systems and communities.

Monitoring and evaluation

61. Monitoring and evaluation will be based on the results and resources framework, the costed evaluation plan and the integrated monitoring, evaluation and research plan. UNICEF will strengthen results-based management skills of staff and partners to adequately plan, deliver, monitor and evaluate programmes. UNICEF will strengthen real-time monitoring for regular programme and humanitarian performance monitoring.

62. UNICEF will support at least four independent evaluations to foster learning and accountability, highlighted in the costed evaluation plan. They will inform programme strategies and improve effectiveness and sustainability of programmes for children.

63. UNICEF will work closely with governments, other United Nations organizations and the Pacific Community's statistics division to strengthen capacities to conduct regular surveys, including demographic and household surveys, household income and expenditure surveys, and censuses. UNICEF will support the strengthening of sector administrative information systems with attention to education, health, WASH and child protection. UNICEF will continue to play a key role in the United Nations and regional Sustainable Development Goal data working group and the United Nations data monitoring and evaluation group.

64. UNICEF will undertake a mid-term review of the multi-country programme in 2020, which will inform the priorities and strategies for the remainder of the programme cycle and make necessary adjustments.

Annex

Results and resources framework

Pacific Island Countries – UNICEF country programme of cooperation, 2018-2022

Convention on the Rights of the Child: Articles 6-7, 12, 19, 23-24, 26-30, 34, 37, 39-40, 42.
National priorities: National development strategies/frameworks of 11 countries and three territories.
Sustainable Development Goals: 1, 2, 3, 4, 5, 6, 8, 10, 11, 12, 13, 16, 17.

United Nations Partnership Strategy outcomes involving UNICEF:
(1) Climate change, disaster resilience and environmental protection; (2) Gender equality; (3) Sustainable and inclusive economic empowerment; (4) Equitable basic services; (5) Governance and community engagement; and (6) Human rights.

Related draft UNICEF Strategic Plan, 2018-2021 Goal Areas:[1] 1-5

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
1. By 2022, children in the Pacific, particularly the most vulnerable, increasingly benefit from quality and resilient health and nutrition services and care practices.	Number of countries with at least 90 per cent of surviving infants receiving DPT3 vaccines. **B**: 8 **T**: 14	WHO/UNICEF reports	National capacities enhanced to strengthen quality health and nutrition policy and legislation, particularly in target countries. Health system capacities strengthened to deliver quality health and nutrition services that are adapted to the impacts of climate change, particularly in target countries.	Ministries of health, WHO, UNFPA, UN-Women, Scaling up Nutrition, ADB, World Bank, Pacific Community (SPC), Pacific Islands Forum Secretariat (PIFS), World Vision, Red Cross	7 000	16 000	23 000
	Number of high burden countries reporting reduction in number of children under-five who are stunted. **B**: 0 **T**: 6	DHS					
2. By 2022, more Pacific children and their families, particularly the	Number of countries with over 75 per cent of the population using basic	JMP update	Governments have strengthened institutional frameworks for water, sanitation and hygiene, particularly	Ministries of health, education, infrastructure and	6 500	19 500	26 000

[1] The final version will be presented to the UNICEF Executive Board for approval at its second regular session of 2017.

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome, regular resources (RR), other resources (OR) (in thousands of United States dollars)*		
					RR	*OR*	*Total*
most vulnerable, are accessing adequate, equitable, affordable drinking water, sanitation and hygiene.	sanitation facility. **B**: 8 **T**: 11		in target countries. Communities have improved access to basic drinking water and sanitation, including in schools and health facilities, particularly in target countries. Parents, caregivers and children have increased knowledge of the risks of poor WASH practices and the skills to adopt safe sanitation and good hygiene practices, particularly in target countries. Governments and communities have increased capacity to prepare for and respond to disasters and adapt to climate change in the WASH sector, particularly in target countries.	public utilities Pacific Regional Infrastructure Facility members. SPC USP			
	Number of countries with over 95 per cent of the population using basic source of drinking water. **B**: 7 **T**: 11	JMP update					
3. By 2022, more pre-primary, primary and lower secondary school aged children, particularly the most vulnerable, are in school and learning.	NER in pre-primary and primary education. **B**: <u>Pre-Primary</u> Kiribati – only GER available) Solomon Islands - NER 27.2 % Vanuatu – 42.5% Federal States of Micronesia – 26% Tuvalu – 76% Nauru – 69.7% <u>Primary</u> Kiribati – 78% Solomon Islands - 88.7 % Vanuatu – 88% Federal States of Micronesia – 87% Tuvalu – 91% Nauru – 86.4%	Annual UIS National education management information systems (EMIS)	More young children have access to quality inclusive early learning opportunities, particularly in target countries. Education stakeholders have increased capacities to identify and respond to learning needs of children not attending school and/or at risk of dropping out, particularly in target countries. The education system at all levels has increased capacity to build resilience and prepare children and school communities to respond to emergencies and disasters, particularly in target countries.	Ministries of education, Education for All, UNESCO, World Bank, ADB, PIFS, SPC, PRC4ECCE	7 000	14 500	21 500

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
	T: Pre-primary: At least 5 percentage points increase for each country. Primary: At least 5 percentage points increase for each country.						
	Transition rate to secondary from primary education. **B**: Kiribati – 52% Solomon Islands - 92.2% Vanuatu – 86.7% Federal States of Micronesia – No data Tuvalu – 82.6% **T**: At least 5 percentage points increase for each country.	National EMIS systems					
	Proportion of children in the Pacific in grade 4 and at the end of primary achieving at least minimum proficiency level in (a) literacy (b) numeracy, by sex. **Regional baseline**: Year 4 literacy: 46.4% (Boys: 40.5% Girls: 52.2%) Year 4 numeracy: 86.2% (Boys: 84.2% Girls: 88.2%) **Regional target**: Year 4 literacy: 55% (Boys: 50% Girls: 60%) Year 4 numeracy: 94% (Boys: 90% Girls: 98%)	PILNA					

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
4. By 2022, children in the Pacific are increasingly protected from violence and abuse.	Number of countries with existence of child protection policy or act. **B**: 7 (Nauru, Niue, the Marshall Islands, Palau, Kiribati, Solomon, Tokelau) **T**: 12 (above plus Cook, Fiji, Samoa, Tuvalu, Vanuatu)	Official publications	Governments have strengthened child protection institutional frameworks, particularly in target countries. Government and other service providers (non-governmental agencies) have enhanced capacities to provide child protection services that prevent and respond to violence and abuse, particularly in target countries. Parents, caregivers and teachers have increased knowledge and skills to eliminate harmful practices and better protect children from violence and abuse, particularly in target countries.	Ministries of Women and Children, Social Welfare, Youth, Justice, Education, Home Affairs, National Disaster Management Offices, National Police Forces, Attorney General and Civil Registrar Offices. UN-Women, UNFPA	8 000	11 000	19 000
	Percentage of caregivers who use physical punishment against children. **B** (2008): Fiji 72% Kiribati 81% Solomon Islands: 72% Vanuatu: 78% **T**: At least 10 percentage points decrease for each country	Surveys					
5. By 2022, children in the Pacific benefit from an improved policy environment and evidence-based planning and financing.	Level of use of child poverty measures data to plan, monitor, evaluate social protection policies, programmes and budgeting for children[2] **B**: Tonga-2. Other 13 countries – 0 **T**: 3 for all countries	Poverty reports, budget briefs, Ministry of Finance reports, sector annual digests	Countries have strengthened capacities to collect, analyse and use child-centred data and information, and to report on and monitor the situation of children. Governments have strengthened capacity for child rights-based policy formulation, planning and budgeting, particularly in target countries. Governments have strengthened institutional capacity to develop	SPC, PIFS, national statistics offices, national human rights committees/ working groups, World Bank, ILO, ministries of Finance, Pacific Policy Network, Regional Rights Resource Team	7 500	2 000	9 500
	Percentage of children in poor households benefiting from	Social protection information					

[2] 0 – No assessment.
1 – Only monetary child poverty data available.
2 – Both monetary and multidimensional poverty data available.
3 – Child poverty measures in use.

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)* RR	OR	Total
	social assistance programmes. **B**: Fiji – 5% Tonga – 0% Kiribati – 0% Samoa – 0% **T**: At least 5 percentage points increase for each country	systems, programme review reports	and deliver equitable child-sensitive social protection systems, particularly in target countries.				
6. Programme effectiveness: programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children in development and humanitarian settings.	Percentage of evaluation recommendations implemented, closed and reported within 12 months of uploading. **T**: 100 %	Evaluation database	UNICEF staff and partners have the guidance, tools and resources to effectively plan, manage and monitor programmes. UNICEF staff and partners have the guidance, tools and resources for effective communication on child rights issues with stakeholders. Strategies to address cross-cutting issues related to child rights are developed and applied.		18 116	4 000	22 116
	Percentage of annual management plan indicators rated as 'on track' or 'achieved' in inSight Dashboard **T**: 100%	inSight					
Total resources					**54 116**	**67 000**	**121 116**